

## **Commercial Fertilizer Applicator Registration**

City of Norman Public Works Department, Engineering Division 201 W. Gray St., Bldg "A", Norman, OK 73069 (405) 366-5455

Cash Check Received: \$	
Receipt.#:	
Rec. By:	
Reg. #	
Office Use Only	

				, and the second se		
Applicant Business Name:						
Address:						
City:		State:	Zip Code:			
Phone #:	Cell Phone:		FAX:			
Contact Name:						
E-Mail Address:				·		
I hereby certify by my signature that	t:					
I have received an informationa (Manufactured Fertilizer Ordinar)		of Article VIII of Ch	apter 10 of the Code of th	ne City of Norman		
I will provide appropriate training to employees to ensure compliance with the requirements of the ordinance as it pertains to application and storage of manufactured fertilizers.						
• I understand the requirements of the Manufactured Fertilizer Ordinance and my responsibilities as a commercial fertilizer applicator to help protect water resources within the City of Norman, including Lake Thunderbird, our drinking water supply.						
<ul> <li>I understand that failure to compound (Manufactured Fertilizer Ordinar dollars (\$750).</li> </ul>						
Applicant's Signature		Date	·			
By checking this box I certify that phosphorus containing fertilizer will not be used or applied by the above named company and hereby request waiver of the annual registration fee.						
State of Oklahoma, County of						
This instrument was executed before	e me on		20 by			
	(signatory printed	name), known to me,	or proven to be, the perso	on that signed the instrument		
as			_	acity of the above-named		
Applicant for the purposes stated therein and who declared to have done so with proper authority.						
(Seal or printed name of Notary Public)		(Signatu	are of notarial officer)	_		
My commission expires:		My commission	#			

Product List						
List product name, type of use, and percent phosphorus for all manufactured fertilizers used on general turf						
Name	Type of Use	Percent Phosphorus				